How to Apply For students to participate in TRiO Student Support Services, one or more of the following requirements must be met, based on the legislative requirements of the U.S. Department of Education: Family income meets published federal guidelines (low income),							Date of Birth	
 □ Neither parent earned a four-year college degree (first generation, and □ Referral by the Student Disability Resource Center (disabled). 								
Additionally, the studen from the services. It is penrollment.				-		First School Enrollment Date		
Download application Responses on	to type in blank bo application may no	xes/spaces and ans ot accurately repre	swer all questions to the sent current circumsta	ne best of your nces or situation	knowledge.		Ger	
TRiO Student S	upport Serv	ices (SSS)		Applicat	ion Form	1	Gender 1	
Name:						Aca	2 3	
First		Middle	Last		Preferred	ıdemı	Rac	
Permanent Mailing Add	dress:	Street Address	A	pt. Number		Academic Need	Race/Ethnicity	
				F		<u></u>	nicity	
		City	State	Zip Code		2	ν _ (
APSU Box:	APSU E-mai	l:	Telephone	e:		For (2 3	
Banner ID (A) Number	:	Other	Telephone:			Office	0 0	
SSN:	Date of Birth:	MM/DD/CCYY	Gender: Male (1)	Female (2)	Non-binary (3)	6 / 8 9 10 11 12 For Office Use Only	6 0 I	
Ethnic Background: Dan addition, select one			nic/Latino (4)? Yes	No		1 2	==	
American Indian/ Ala Hawaiian/Pacific Islan	\ <i>/</i>	sian (2) Black	/African American (3)	White (5)		14 15	ility 1 2	
Eligibility Criteria: F documentation for enr	0 1	•	_		iires specific		1.5	
A. Citizenship Status			Yes	No		College Grade Level/Elliny to Floject	5 H	
Are you a U.S. citiz B. First-Generation St	•			NO			Project Entry Date	
Mother has a 4-yea	_		Yes	No		C4	t Ent	
Father has a 4-year			Yes	No		EI/EI	ry Da	
C. Income Status						Пу	ite	
Do your parents cla	aim you as a depen	dent?	Yes	No		.0	ק הקים ה	
(If yes, then family inc by the parents).	ome is based on pa	arental income ar	nd supporting docume	entation must	be provided	-	-	
What is your marita	al status?		Single	Married	I	۷ ،	<u> </u>	
(If married, then family provided by both).	y income is based	on you and your	spouse and supportin	g documentat	ion must be	0 0	n	

Yes

No

Did you file federal income taxes in the past calendar year?

(If NO, then please provide income verification from one of the following Government sources:

SS/SSI Benefits AFDC/ADC from Department of Hu	uman Services VA Benefits		
Workmen's Compensation Proof of Child Support	Unemployment Benefits Oth	er	
I am considered low-income by federal guidelines	Yes	No	
Disability Status			
Are you registered with the Office of Disability?	Yes	No	
Do you plan to register with the Office of Disability Service	ees? Yes	No	
Have you previously earned a Bachelor's Degree?	Yes	No	
Have you ever attended college?	Yes	No	
If yes, where and when?	(From)	(To)	
	(MM/CCYY)		(MM/CCYY)
Do you plan to earn a Bachelor's Degree from APSU?	Yes	No	
Have you applied for financial aid?	Yes	No	
Have you been offered financial aid?	Yes	No	
	Workmen's Compensation Proof of Child Support I am considered low-income by federal guidelines Disability Status Are you registered with the Office of Disability? Do you plan to register with the Office of Disability Service Have you previously earned a Bachelor's Degree? Have you ever attended college? If yes, where and when? Do you plan to earn a Bachelor's Degree from APSU? Have you applied for financial aid?	Workmen's Compensation Proof of Child Support Unemployment Benefits Oth I am considered low-income by federal guidelines Yes Disability Status Are you registered with the Office of Disability? Yes Do you plan to register with the Office of Disability Services? Yes Have you previously earned a Bachelor's Degree? Yes Have you ever attended college? Yes If yes, where and when? (From) Do you plan to earn a Bachelor's Degree from APSU? Yes Have you applied for financial aid? Yes	Workmen's Compensation Proof of Child Support Unemployment Benefits Other I am considered low-income by federal guidelines Yes No Disability Status Are you registered with the Office of Disability? Yes No Do you plan to register with the Office of Disability Services? Yes No Have you previously earned a Bachelor's Degree? Yes No If yes, where and when? (From) (To) Do you plan to earn a Bachelor's Degree from APSU? Yes No Have you applied for financial aid? Yes No

Please attach a copy of your financial aid award history. TRiO Student Support Services is required to verify through Student Financial Aid Office (SFAO) the amount of financial aid needed, the amount of financial aid offered, the amount of unmet need, the amount of grant aid offered, and the reason full financial aid not awarded.

CERTIFICATION STATEMENT

I certify that all information on this application, including supporting financial and family documentation, is true and correct to the best of my knowledge. I give permission to release my grades, financial aid/tax information, and SSN to TRiO SSS. In addition, I give permission to release my name and/or picture to provide recognition in newsletters, web pages and/or other pub-lications. By signing this application, I understand that this will be an active contract, as long as I meet the requirements for the program. An email will be sent with the covered contract of what services are expected from both parties.

I understand that the above information will be used for statistical purposes in the Annual Performance Report required by the U.S. Department of Education.

Student Signature	(MM-DD-CCYY) Date		
(MM-DD-CCYY) Date Accepted/Date of Contract	Signature of Director		

Austin Peay State University affirms that it does not discriminate based on race, color, religion, national origin, sex, sexual orientation, age, disability or veteran status in the educational programs or activities which it operates, or in admission to or employment in such programs or activities, as set forth in Title VI and VII, Title IX, section 504, and ADA. Also see University Affirmative Action Philosophy in Student Handbook and Planner.

Financial Aid Consent

I give permission to TRiO Student Support Services of Austin Peay State University to work with the
Student Financial Aid Office of Austin Peay State University to secure the necessary data, if needed,
to complete my TRiO Student Support Services application.
Signature Date
Signature Date
Please initial which form of income verification you would like to provide to complete the TRiO Student Support Services application.
Tax Statement Financial Aid